

RECEIVED
CENTRAL FAX CENTER
FEB 16 2007



Vertex Pharmaceuticals Incorporated
130 Waverly Street • Cambridge, MA 02139-4242
Tel. 617.444.6100 • Fax 617.444.6483
<http://www.vrtx.com>

FAX TRANSMISSION

To	USPTO
Examiner	Eric Olson
Group Art Unit	1623
From	Karen E. Brown
Date	February 16, 2007
Application No.	10/657,811
Attorney Docket No.	VPI/02-121 US
Total Pages	18

Message or Comment

If any problems occur with this fax transmittal, please call (617) 444-7517 immediately.

FEB 16 2007


Attorney Docket No.: VPI/02-121

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/657,811
Confirmation No.: 1126
Filing Date: September 8, 2003
Examiner: Eric Olson
Group Art Unit: 1623
Applicants: Mark Ledebøer et al.
For: ISOXAZOLES AND USES THEREOF

Certificate of Facsimile Transmission Under 37 CFR §1.8

I hereby certify that this correspondence and any documents referred to as attached hereto are being facsimile transmitted to the United States Patent and Trademark Office on February 16, 2007.

LAUREN DeVINCENZO

Signature

February 16, 2007
Cambridge, Massachusetts

Mail Stop Amendments
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Sir:

Transmitted herewith: ☒ an Amendment and a Reply to Office Action; ☒ a Petition for Extension of Time; ☐ a Declaration; ☐ a Power of Attorney; ☐ a copy of a Notice to File Missing Parts; ☐ a Response to Notice to File Missing Parts; ☐ a Supplemental Declaration; ☐ an Associate Power of Attorney; ☐ a substitute Specification; ☐ formal drawings; ☐ Notice of Appeal; ☐ Appeal Brief; ☐ Petition for Revival; to be filed in the above-identified patent application.

RECEIVED
CENTRAL FAX CENTER
FEB 16 2007

Applicants: Mark Ledebner et al.
Application No.: 10/657,811

FEE FOR ADDITIONAL CLAIMS

- ☒ A fee for additional claims is not required.
- ☒ The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 50-0725. A duplicate copy of this transmittal letter is transmitted herewith.

EXTENSION FEE

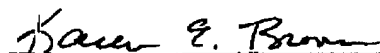
- ☒ The following extension is applicable to the Response filed herewith; ☐ \$120.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a); ☐ \$450.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); ☒ **\$1,020.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a)**; ☐ \$1,590.00 extension fee for response within fourth month pursuant to 37 C.F.R. § 1.136(a); ☐ \$2,160.00 within fifth month pursuant to 37 C.F.R. § 1.136(a).
- ☐ A check in the amount of ☐ \$120.00; ☐ \$450.00; ☐ \$1,020.00; ☐ \$1,590.00; ☐ \$2,160.00 in payment of the extension fee is transmitted herewith.
- ☒ Please charge the extension fee in the amount of ☐ \$120.00; ☐ \$450.00; ☒ **\$1,020.00**; ☐ \$1,590.00; ☐ \$2,160.00 to Deposit Account No. 50-0725. A duplicate copy of this transmittal letter is transmitted herewith.
- ☒ The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 50-0725. A duplicate copy of this transmittal letter is transmitted herewith.

MISCELLANEOUS FEES

- ☐ Please charge \$_____ to Deposit Account No. 50-0725 in payment of the for _____ (37 C.F.R. §_____).

Applicants: Mark Ledebor et al.
Application No.: 10/657,811

Respectfully submitted,



Karen E. Brown Reg. No. 43,866

Attorney for Applicants

c/o Vertex Pharmaceuticals Incorporated

130 Waverly Street

Cambridge, Massachusetts 02139

Tel: (617) 444-6168

Fax: (617) 444-6483